



READ INSTRUCTION / INFORMATION SHEET CAREFULLY BEFORE YOU BEGIN

Please Print or Type Characters Only in Capital Letters Using Black or Blue Ink

A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	W	X	Y	Z
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VOLUME
Under \$20,000
\$20,000-\$50,000
\$50,000-\$2,000,000
\$2,000,000 and over

PRINCIPAL
\$100
200
300
400

CONJUNCTIVE
\$ 50
50
145
200

AGENT FEE
\$35 Each Agent

LICENSE REPRINT FEE
\$10
(Effective 7/1/02)

ENTER YOUR FEES HERE			DEPARTMENT USE ONLY	
	COLUMN 1	COLUMN 2		DOUBLE FEES
PRINCIPAL LICENSE FEE	a. _____	c. _____	PRINCIPAL LICENSE FEE	_____
CONJUNCTIVE LICENSE FEE	b. _____	d. _____	CONJUNCTIVE LICENSE FEE	_____
AGENT FEE	\$35 X _____ = _____		AGENT FEE	\$35 X _____ = _____
	<hr/>		TOTAL FEES DUE	_____
Column 1 + Column 2			RECEIVED	_____
TOTAL DUE			O/S	_____
			RECEIVED	_____
			O/S	_____

7. **DETERMINE YOUR LICENSE CATEGORY:** Choose one or more of the following categories

PRODUCE DEALERS ACT = ☐ Cash Buyer ☐ Dealer ☐ Broker ☐ Commission Merchant

PROCESSORS LAW = ☐ Processor ☐ Processor Cash Buyer

8. **BUSINESS STRUCTURE** (CHECK ONE)

☐ Sole Proprietor ☐ Partnership ☐ Corporation* ☐ Limited Liability Company* Other _____
(Includes Husband/Wife)

*Limited Liability Companies or Corporations not registered with the California Secretary of State must attach their Articles of Incorporation and registration from its state or country of incorporation (Ref. Section 1701.2 (c)3 CCR)

8a. Corp or LLC No.	8b. State Registered	8c. Date Registered	8d. Federal Tax Identification Number
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8e. AGENT FOR SERVICE OF SUMMONS (Non-California based limited liability companies or corporations must provide information below for the agent for service of summons listed with the California Secretary of State.)

Full name of agent	Business Address of Agent	Date of Birth	Drivers License No.
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9. **RESPONSIBLE PARTIES**

INDIVIDUALS, PARTNERS, MEMBERS OF LLC's, OR CORPORATE OFFICERS MUST COMPLETE THE FOLLOWING: (If a partner, LLC or Corporation is listed, you must also identify the individual partner, member or officer of that entity.) If additional space is required, attach a separate sheet.

FULL NAME	TITLE	HOME ADDRESS (PHYSICAL ADDRESS, CITY, STATE & ZIP)	DATE OF BIRTH	SOCIAL SECURITY NO.	DRIVERS LICENSE NO.

9a. **FINANCIAL INTEREST**

LIST ALL INDIVIDUALS OR ENTITIES THAT HAVE OWNERSHIP OF AT LEAST 10% OF THE SHARES OF A CORPORATION OR AT LEAST 10% OF THE EQUITY OF A PARTNERSHIP OR LIMITED LIABILITY COMPANY. (If additional space is needed, attach a separate sheet or list on page 4)

FULL NAME	TITLE	INTEREST %	HOME ADDRESS (PHYSICAL ADDRESS, CITY, STATE & ZIP)	DATE OF BIRTH	SOCIAL SECURITY NO.	DRIVERS LICENSE NO.

10. **CALIFORNIA FARM PRODUCTS HANDLED**

PLEASE CIRCLE ALL OF THE CALIFORNIA FARM PRODUCTS YOU WILL BE HANDLING. IF A PRODUCT YOU WILL BE HANDLING IS NOT LISTED, PLEASE WRITE IN THE COMMODITY IN THE SPACE PROVIDED IN #17 (OTHER).

01	APIARY	12	FRUITS	15	LIVESTOCK	23	SEEDS
03	BERRIES	10	GRAINS	08	MANURE	22	VEGETABLES
04	CITRUS	11	GRAPES	16	MELONS	17	OTHER
05	COTTON	09	WINE GRAPES	18	NURSERY STOCK		
06	CUT FLOWERS	13	HAY/STRAW	19	NUTS		
24	DRIED FRUIT	14	HIDES	20	POULTRY		
07	EGGS	02	HULLS	21	RABBITS		

11. **SCHEDULE OF CHARGES** (Must be completed by all Brokers and/or Commission Merchants. If additional space is needed attach a separate sheet.)

STYLE OF CONTAINER (box, carton etc.)	COMMODITY	COMMISSION/BROKERAGE PER PACKAGE

11a. **SERVICE CHARGES:**

STYLE OF CONTAINER (box, carton, etc.)	COMMODITY	PACKING	PRECOOLING & PALLETIZING	TYPE OF SERVICE	CHARGE

12. HAVE YOU OR ANY PRINCIPALS OF YOUR COMPANY EVER HAD LICENSES ISSUED BY THE DEPARTMENT OF FOOD AND AGRICULTURE? YES ☐ NO ☐

13. DO YOU OWE ANY CALIFORNIA FARM PRODUCT CREDITORS SUMS OVER 30 DAYS OR BEYOND THE PAYMENT TERMS? YES ☐ NO ☐

14. HAVE YOU OR YOUR PARTNER FILED BANKRUPTCY IN THE PAST 4 YEARS? YES ☐ NO ☐

15. HAVE YOU OR YOUR PARTNER BEEN CONVICTED OF A CRIME THAT INCLUDES AS ONE OF ITS ELEMENTS THE FINANCIAL VICTIMIZATION OF ANOTHER PERSON? YES ☐ NO ☐

IF YOU ANSWER YES TO ANY OF THE ABOVE, LIST ANSWER ON PAGE 4 OF THIS FORM OR ON SEPARATE SHEET OF PAPER.

16. WHEN WILL OR DID YOU BEGIN OPERATIONS REQUIRING A MARKET ENFORCEMENT LICENSE? DATE: _____

NOTICE OF CREDIT AND CRIMINAL INFORMATION:

APPLICANT UNDERSTANDS THAT THE DEPARTMENT MAY ACCESS ANY AND ALL INFORMATION FROM CREDIT REPORTING AGENCIES AND ALL CRIMINAL RECORD INFORMATION IN CONSIDERATION OF THIS APPLICATION.

STATEMENT FOR CASH BUYER:

APPLICANT UNDERSTANDS THAT "CASH" MEANS COIN OR CURRENCY OF THE UNITED STATES AND DOES NOT INCLUDE A CHECK OR MONEY ORDER. TO PAY CALIFORNIA LICENSEES OR PRODUCERS FOR FARM PRODUCTS ON ANY OTHER BASIS SUCH AS CREDIT, CHECKS OR OTHER NEGOTIABLE PAPER, WOULD BE IN VIOLATION OF THE FOOD AND AGRICULTURAL CODE.

INITIAL

LICENSE AFFIDAVIT:

APPLICANT WILL ABIDE BY ALL PROVISIONS OF DIVISION 20, CHAPTERS 6 & 7 OF THE CALIFORNIA FOOD AND AGRICULTURAL CODE. APPLICANT WILL PREPARE AND RETAIN ADEQUATE FINANCIAL RECORDS TO DOCUMENT ALL TRANSACTIONS BETWEEN APPLICANT AND FARM PRODUCT GROWERS AND LICENSEES AND FINANCIAL INFORMATION WHICH FAIRLY PRESENTS MY FINANCIAL CONDITION AS OF THE END OF MOST RECENT FISCAL YEAR. APPLICANT IS CURRENT IN MAKING ALL PAYMENTS REQUIRED UNDER UNDISPUTED CONTRACT AGREEMENTS WITH CALIFORNIA FARM PRODUCT GROWERS AND LICENSEES.

INITIAL

APPLICATION MUST BE SIGNED BY AN AUTHORIZED REPRESENTATIVE LISTED IN ITEM 9 (Owner or Partner, Member or Officer)

SIGNATURE OF APPLICANT	PRINT OR TYPE NAME	TITLE	DATE

The Department of Food and Agriculture has established time periods for the processing of permit applications, in compliance with Government Code Section 15374-15378. Failure to comply with these time periods may be appealed to the Secretary of Food and Agriculture, 1220 N Street, Sacramento, CA 95814, pursuant to regulations set forth in Title 3, California Code of Regulations, Section 301. Under certain circumstances, the Secretary may order that the applicant receives a reimbursement of filing fees.

USE THIS SHEET FOR ADDITIONAL INFORMATION

